

MULTIPLE DEPT
CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.
10/554116

FILING DATE

APPLICANT(S)

(5220)

CLAIMS

	CLAIMS							CLAIMS					
	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1				51						
2		1		1			52						
3	2		2				53						
4	0		1				54						
5	0		1				55						
6	0		1				56						
7	0		1				57						
8	0		2				58						
9	0		1				59						
10	0		1				60						
11	0		1				61						
12	0		1				62						
13	0		1				63						
14	0		1				64						
15	0		1				65						
16	1		1				66						
17	1		1				67						
18	2		2				68						
19	0		2				69						
20	0		2				70						
21	0		2				71						
22	0		2				72						
23	0		2				73						
24	0		2				74						
25	0		2				75						
26	0		1				76						
27	0		1				77						
28	0		1				78						
29	0		1				79						
30	0		1				80						
31	0		1				81						
32	0		1				82						
33	0		1				83						
34	1						84						
35	1						85						
36							86						
37							87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	4		2										
TOTAL DEP.	33		41										
TOTAL CLAIMS	37		43										